# City of St. Charles Basement Finish or Remodel



Building Zoning Division 2 East Main Street St. Charles IL 60174 630.377.4406 (Office) 630.443.4638 (Fax) http://www.stcharlesil.gov

Please direct any and all questions to the City of St. Charles Building Zoning Division: Monday (8 AM to 7 PM) Tuesday through Friday (8 AM to 4:30 PM) at 630.377.4406

A building permit is required prior to any construction or alteration in your basement. The following are guidelines and comments for obtaining a building permit.

#### **Application and Drawings Procedures:**

- ➤ An application is to be filled out and submitted to the Building Department. The contractors names, addresses, phone numbers and, if required, their license numbers are to be filled out when submitting the application.
- ► Two (2) sets of drawings showing the construction of details for the finish, remodel, or alteration in your basement are to be submitted with the application.
- ▶ Our goal is to complete the review of your building permit within 10 working days.

# **Application – Permit Fees:**

⇒ A filing fee is to be paid at time of submission of application and plans.

A submittal fee of \$110.00 (to be paid at time of submittal)

Additional fees for your permit to be paid at the time the permit is approved and ready to be obtained.

Alteration is based upon estimated cost: \$4,001 to \$24,000 at \$5.85 each/1,000 \$24,001 on at \$2.65 each 1,000

- ⇒ **Re-inspection fee**. During the construction of your project should you fail any of the required inspections there is a re-inspection charge. The fees are due prior to certificate of occupancy. The fee schedule is as follows;
  - \$60.00 per Building Department re-inspection for all types of inspections during construction (excluding finals)
  - \$80.00 per re-inspection for all residential final inspections.
- ⇒ **Temporary certificate of occupancies**. \$80.00 is due prior to issuance of a temporary certificate of occupancy for residential.

#### **General Comments:**

- \* The Permit Conditions form and stamped "FIELD COPY" of the plans are to be on the job site.
- \* A minimum of 24-hour notice is required when scheduling any inspection.
- \* Caulk slab to wall per radon requirements in finished areas.
- \* Smoke detectors per code, 110V with battery back up interconnected. One required in furnace, finished area, and bedrooms.
- \* Door into the furnace room with light switch on wall.
- \* Electric outlet receptacles shall be installed a minimum 6-feet from every break (i.e. stairway, fireplace, door, etc...) then every 12-feet on center.
- \* Fire-stop the top wall plate between wall and foundation and all chases with approved material.
- \* HVAC to be installed per the 2003 International Mechanical Code, with local revisions.
- \* Secure all HVAC duct dampers in the open position above all drywall ceilings.
- \* Provide access for all electric boxes, plumbing cleanouts, and shut offs above ceiling.
- \* Provide a lighting fixture within 4-feet of electrical panel and mechanical equipment.
- \* GFI receptacles required within 3-feet from edge of bathroom sink.
- \* Provide a minimum of R-5 insulation in all walls along foundation.
- \* All basement bedrooms and/or finished rooms with a closet are to have a window or door to exterior that meets the egress requirements.
- \* The bottom wall plate shall be all weather treated lumber.
- \* The mechanical room shall have the required make up air for all fuel burning equipment.

#### **Inspections:**

The following is a list of inspections, which might be required for your project.

- o Framing
- o Electric
- o Underground Plumbing
- o Rough Plumbing
- o HVAC
- Insulation
- o Final

### **Building Codes:**

The following are the Building Codes, which the City of St. Charles has adopted:

- o St. Charles Municipal Code
- o 2003 Int'l Building Code w/revisions
- o 2003 Int'l Mechanical Code w/revisions
- o 2002 Nat'l Electrical Code w/revisions
- o 1998 IL State Plbg Code w/revisions
- o 2000 Int'l Residential Code/revisions
- o Fire Prevention Codes
- o 2003 Int'l Fuel Gas Code w/revisions

# **Homeowner – Contractor Responsibilities:**

- It is the responsibility of the homeowner/contractor to schedule with the Building Department the required inspections. The required inspections are indicated on the Plan Review form, which is attached to your permit and the Field Copy of drawings. When calling to schedule an inspection, please have the <u>address and the permit number</u>.
- ✓ Inspections shall be called a minimum of 24 hours before they become due.



#### CITY OF ST. CHARLES TWO EAST MAIN STREET ST. CHARLES, ILLINOIS 60174-1984

DEPARTMENT: BUILDING & ZONING PHONE: (630) 377-4406 FAX (630) 443-4638

# APPLICATION FOR CONSTRUCTION FOR BUILDING PERMITS APPLICATION DATE: \_\_\_\_\_ PERMIT ISSUED\_\_\_\_\_ NO.: \_\_\_\_ PLEASE PRINT ALL INFORMATION I, \_\_\_\_\_\_, do hereby apply for a permit for the following described work located at Lot Unit NOTE: Is property located in the Historic Preservation District? Yes No Please circle either yes or no Subdivision \_\_\_\_\_\_, Type of construction \_\_\_\_\_ Description of proposed work: Square feet in building \_\_\_\_\_ Estimated cost of construction \_\_\_\_\_ Use of building \_\_\_\_\_\_ No. & Size of electric meter \_\_\_\_\_ No. & Size of water meters \_\_\_\_\_ Specifications\_\_\_\_\_ Plat of Survey\_\_\_\_ Owner of Property General Contractor Name: Name: City: \_\_\_\_ City: State/Zip Code: State/Zip Code: Phone: Electric Contractor Concrete Contractor Name: Name: City: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip Code: \_\_\_\_\_ State/Zip Code: \_\_\_\_\_

**Continued on reverse side** 

#### PLEASE PRINT ALL INFORMATION

Plumbing Contractors	Roofing Contractors
Name:	Name:
Address:	Address:
City:	City:
State/Zip Code:	State/Zip Code:
Phone:	Phone:
IL & Registration No.:	Illinois License No:
	License Expiration Date:
Sewer & Water Contractor	HVAC Contractor
Name:	Name:
Address:	Address:
City:	City:
State/Zip Code:	State/Zip Code:
Phone:	Phone:
plumbing, electric and other applicable ordinances of the cause all work to be performed according to the propersonally supervise the work and shall do, or cau specifications and other written information supplied as applicable ordinances and the provision thereof and responsible for all work accomplished under the permishall call for inspections as required at a minimum of 24-	ovisions of said ordinances. I, or my agent, shall use to have done, said work according to plans, as a part of this application. I am familiar with the lin signing this application do willingly become it by all contractors, tradesmen and workmen, and
PRINT NAME:SIG	GNATURE:
Name of actual business(s) that will occupy this  REPORT OF THE BUILDING OFFICE	
Remarks:	
	For Office Use
	Received
Accepted: Rejected: Date:	Fee Paid \$
Signed:	Receipt #
Copies of application distributed to:	
Electric:Engineering:Meter:PW:	Fire:Historic Preservation: